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# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA

#### CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s)	Eugene H. Jumper Melinda C. Jumper	Case No: 15-62054
This plan, dated No	vember 30, 2015 , is:	
	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces the Confirmed or Cunconfirmed Plan dated.  Date and Time of Modified Plan Confirming Hearing: Place of Modified Plan Confirmation Hearing:	
The P	lan provisions modified by this filing are:	
Credit	ors affected by this modification are:	
OTICE, VOUS S	Y 63777	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$72,792.15

Total Non-Priority Unsecured Debt: \$22,895.11

Total Priority Debt: \$4,800.00 Total Secured Debt: \$70,825.00

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- 1. Funding of Plan. The debtor(s) propose to pay the trustee the sum of \$140.00 First Month, then \$530.00 monthly x 59 months = \$31,270.00. Other payments to the Trustee are as follows: NONE. The total amount to be paid into the plan is \$31,410.00.
- 2. Priority Creditors. The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$ 3,769.52 balance due of the total fee of \$ 4,000.00 concurrently with or prior to the payments to remaining creditors.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Tressument Silver Service	Type of Priority  Taxes and certain other debts  Taxes and certain other debts  Taxes and certain other debts	Estimated Claim \$200.00 \$3,000.00 \$120.00	Payment and Term Prorata Prorata Prorata
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- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan.

The following secured claims are to be "crammed down" to the following values:

~ ··		<b>&amp;</b>		
<u>Creditor</u> United Consumer Financial Services	Collateral Kirby Cleaning System	Purchase Date 6/2013	Est Debt Bal. \$391.30	Replacement Value \$384.00

### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

Creditor -NONE-	Collateral Description	Estimated Value	Estimated Total Claim
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### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor United Consumer Financial Service Anderson Fin. Services, Loan Max Credit Acceptance Co. Services Micheal Wayne Investment Co. Any adequate protection payn	1996 Ford Explorer 2007 Dodge Caliber 2007 Chevrolet Cobalt	Adeq. Protection  Monthly Payment  \$10.00 x 5 months  \$10.00 x 5 months  \$30.00 x 5 months  \$70.00 x 5 months	D Be Paid By Trustee Trustee Trustee Trustee Trustee
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Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

# D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Creditor Credit Acceptance Anderson Fin. Services, Loan Max	Collateral  2007 Dodge Caliber 1996 Ford Explorer	Approx. Bal. of Debt or "Crammed Down" Value Debt \$2,850.00 Debt \$900.00	Interest Rate 4.25% 4.25%	Monthly Paymt & Est. Term**  \$64.35 x 48 months \$26.57 x 36 months
United Consumer Financial Services	UCFS Kirby Cleaning System 2007 Chevrolet Cobalt	Cramdown \$384.00 Debt \$9,650.00	4.25% 4.25%	\$10.41 x 34 months \$195.57 x 54 months

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

#### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 13 %. The dividend percentage may vary depending on actual claims filed. If this case were approximately 0 %.
- Separately classified unsecured claims.

Creditor -NONE-	Basis for Classification	Treatment
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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without provided for in the loan agreement.

Creditor PLEASE SEE PARAGRAPH # 11 FOR FURTHER DETAILS. Seterus Collateral House & land at 572 Arlington Road, Danville, VA	Regular Contract <u>Payment</u> <b>\$650.00</b> monthly	Estimated Arrearage \$650.00	Arrearage Interest Rate -0-	Estimated Cure Period 60 months	Monthly Arrearage Payment Prorata
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B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

Creditor Collateral -NONE-	Regular Contract Estimate Payment Arrearag		Term for Arrearage	Monthly Arrearage <u>Payment</u>
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C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

<u>Creditor</u> <u>Collateral</u>	Interest Estimated Rate <u>Claim</u>	Monthly Paymt& Est. Term**
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- 6. Unexpired Leases and Executory Contracts. The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

Creditor -NONE- Type of Contra
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**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

			Monthly	
Creditor -NONE-	Type of Contract	Arrearage	Payment for Arrears	Estimated Cure Period
NOITE-			TOT ZATEATS	Caro I criod

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- Liens Which Debtor(s) Seek to Avoid.
  - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

Exemption Amount

Value of Collateral

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

- 8. Treatment and Payment of Claims.
  - All creditors must timely file a proof of claim to receive payment from the Trustee.
  - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
  - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
  - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- 9. Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan.

  Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan: NOTE TO ALL CREDITORS:

"Any unsecured proof of claim for a deficiency which results from the surrender and liquidation of the collateral noted in paragraph 3.B of his plan must be filed by the earlier of the following dates or such claim will be forever barred: (1) within 180 days of the date of the first confirmation order confirming a plan which provides for the surrender of said collateral, or (2) within the time period set for the filing of an unsecured deficiency claim as established by any order granting relief from the automatic stay with respect to said collateral.

Said unsecured proof of claim for a deficiency must include appropriate documentation establishing that the collateral surrendered has been liquidated, and the proceeds applied, in accordance with applicable state law."

ADDITIONAL PROTECTION ALSO CONSISTS OF THE FOLLOWING IN THIS CASE:

 $\underline{x}$  INSURANCE WILL BE MAINTAINED ON ALL VEHICLES SECURING CLAIMS TO BE PAID BY THE TRUSTEE PURSUANT TO PARAGRAPHS 3A, 3B, 5B, 11A OR 11B.

X EACH SECURED CREDITOR, IF ANY, MAY CONTACT THE DEBTOR DIRECTLY CONCERNING PROOF OF FUTURE INSURANCE COVERAGE AND MAINTENANCE OF THE SAME, CONCERNING ASSETS THAT THE DEBTOR'S RETAIN.

NOTE TO ALL SECURED CREDITORS: IF THE DEBTOR(S) BECOMES DELINQUENT IN THEIR DIRECT PAYMENTS OR, IF Page 50f 6

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INSURANCE LAPSES, THEN THE SECURED CREDITORS MAY CONTACT THE DEBTOR(S) DIRECTLY CONCERNING THE DIRECT PAYMENTS AND/OR INSURANCE WITH A COPY OF CORRESPONDENCE BEING SENT TO TRUSTEE AND COUNSEL FOR DEBTORS.

Attorneys fees noted in paragraph # 2A shall be approved on the confirmation date unless previously objected to. Said allowed attorney fees shall be paid by the Trustee prior to the commencement of payments required to be made by the Trustee under Paragraphs # 4, 5, and 6 herein.

"The \$3,769.	52 in the Debtor(s)' atto	rney's fees to be paid by the Cha	ipter 13 trustee ai	re broken down as follo	ws:
		ed, or already approved, by the			
	: Additional pre-co	onfirmation or post-confirmatio nfirmed modified plan ECF#		proved by the Court by	separate order
(iii) \$	: Additional post-c	confirmation fees being sought in	this modified pla	an, which fees will be ap	proved.
When Debtor		"ect nayments to Guadian II I			
CREDITOR(	<u>M</u>	onth Debtor(s) to resume regula	r direct payments	S:	
Seterus		ovember, 2015		_	
Signatures:					
Dated: No	vember 30, 2015				
/s/ Eugene H. Eugene H. Ju Debtor	Jumper nper		Reginald R		
loi Malimala O	•		Debtor's At	ttorney	
/s/ Melinda C. Melinda C. Ju Joint Debtor	Jumper nper				
Exhibits: I certify that on Service List.	- Mairix of Parties Serv	dget (Schedules I and J); ed with Plan Ce. I mailed a copy of the foregoing	rtificate of Service to the creditors and	d parties in interest on the	attached
		Isl Reginald R. Yancey Reginald R. Yancey Signature			
		P.O. Box 11908 Lynchburg, VA 24506-1908 Address			
		434-528-1632 Telephone No.			

Ver. 09/17/09 [effective 12/01/09]

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Debtor 1		•								
Dakkaro	Eugene H.	Jumper								
Debtor 2 (Spouse, if filing)	Melinda C.	Jumper		-·,						
United States Ban	kruptcy Court for th	ne: WESTERN DISTRIC	OT OF VIR	GINIA			į			
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Del		Melinda C. Jumper		Case	e number (if known)	15-620	54	
	Coi	by line 4 here		Fo	r Debtor 1	For De	ebtor 2 or ling spou	· ise
			4.	\$	2,287.32	\$	1,645	
ö.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	_					
	5b.	Mandatory contributions for retirement plans	5a.	\$	365.97	\$	296	.18
	5c.	Voluntary contributions for retirement plans	5b.	\$_	0.00	\$	0	.00
	5d.	Required repayments of retirement fund loans	5c.	\$	0.00	\$	0.	.00
	5e.	Insurance	5d.	\$_	0.00	\$	0.	.00
	5f.	Domestic support obligations	5e.	\$	0.00	\$	0.	.00
	5g.	Union dues	5f.	\$	0.00	\$	0.	.00
	5h.	Other deductions. Specify: Pre-tax deductions-401K	5g.	\$	0.00	\$	0.	.00
		MEDINS MEDINS	5h.+			+ \$	32.	91
	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		\$	252.85	\$	0.	00
	Cala	Mulate total manufactures. Add lines 5a+5p+5c+5d+5e+5f+5g+5h.	6.	\$	618.82	\$	329.	09
	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,668.50	\$	1,316.	
	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	•	_	\ <u>-</u>	·	1,010.	<u> </u>
	8b.	Interest and dividends	8a.	\$	0.00	\$	0.0	00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	0.0	00
	8d.	Unemployment compensation	8c.	\$	0.00	\$	0.0	00
	8e.	Social Security	8d.	\$	0.00	\$	0.0	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	0.0	00
ł	8g.	Pension or retirement income	8f.	\$	0.00	\$	0.0	0
8	8h.	Other monthly income. Specify:	8g.	\$	0.00	\$	0.0	0
			_ 8h.+	\$	0.00 +	\$	0.0	0
		ll other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	<u> </u>	0.00	\$	0.0	00
•	Calcu	late monthly income. Add line 7 + line 9.	10. \$	,				
F	Add th	e entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	`	1,	668.50 + \$	1,316.3	4 = \$	2,984.
li o C S	State and the state of the stat	all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, your riends or relatives. include any amounts already included in lines 2-10 or amounts that are not a	depende evailable	to pay	y expenses listed	in Sched		0.0
A W a	dd th Vrite t pplies	e amount in the last column of line 10 to the amount in line 11. The resinat amount on the Summary of Schedules and Statistical Summary of Certain	ult is the n <i>Liabilit</i>	comb es and	ined monthly inco d Related <i>Data,</i> it			2,984.8
,	A	town of an X					Combi	
J	o you	expect an increase or decrease within the year after you file this form?					month	ly income
		No.						

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1	ation to identify	our case:						
Debtor 1	Eugene H.	Jumper				Che	eck if this is:	
Debtor 2			—·— .—.				An amended filin	a
(Spouse, if filing)	Melinda C.	Jumper					A supplement sh	g owing post-petition chapte of the following date:
United States Bankr		WESTERN DISTR	RICT OF VIRG	INIA			MM / DD / YYYY	-
Case number 15	5-62054	<u></u>					A separate filing f 2 maintains a sep	or Debtor 2 because Debterarate household
Official Fo	rm B 6J							
		Expenses						
se as complete s	and accurate se							12/1
———	ibe Your House	y question.	sheet to this	form. On the top of	any a	dditi	onal pages, write	12/1 for supplying correct your name and case
☐ No. Go to	line 2.							·,,,
Yes. Does	s Debtor 2 live i	n a separate househo	-ald2					
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	="	t file a separate Sched	dule J.					
Do you have	dependents?	■ No						
Do not list Del and Debtor 2.	ebtor 1	Yes. Fill out this in each depende	iformation for	Dependent's relation	nship to	<b>)</b>	Dependent's	Does dependent
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17 2. Easimans		Monthly Expenses						
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modification to the terms of your mortgage?  No.  Yes.	24 г					530.84
modification to the terms of your mortgage?  No.  Yes.	~7. L F	For examn	te, do you expect to finish paying for your expenses within the year after you	file this f	orm?	
■ No.  □ Yes.	r	nodificatio	in to the terms of your mortgage?	tgage payr	ment to increase or	decrease because of a
☐ Yes.	i	No.	• 1919-			and addition of a

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Debtor 1	<b>-</b>	•							
	Eugene H.	Jumper	·			_ [			
Debtor 2 (Spouse, if filing)	Melinda C.	Jumper							
United States Bankrupto	cy Court for th	ne: WESTERN DISTRIC	T OF VIRGIN	IIA					
	2054			:					
If known)			_			Check if this			
·						☐ An amen	ided fili	ng	
Official Form I	B 6I					☐ A supple 13 incom	ment s ie as of	howing post-peti f the following da	tion chapte te:
Schedule I: Y	our Inc	ome				MM / DD			
e as complete and acc	urate as nos	ssible. If two married pe a are married and not fil ur spouse is not filing w	onle are filine	tonother /	1- 4				12/
Fill in your employ information.			Debtor 1			Debtor	' 2 or п	on-filing spous	e
If you have more that attach a separate pa	an one job,	Employment status	■ Employe	ed		<b>■</b> Emp		g opous	
information about ac employers.	age with dditional		☐ Not emp	loyed		□ Not	•	⁄ed	
		Occupation				Securi	ity Off	icer	
Include part-time, se self-employed work.	easonal, or								
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Occupation may incl or homemaker, if it a	inde student ipplies.	Employer's address	Martha Dri Danville, V	íve ⁄A		Suite 2 Works	203 A at Go	odyear, Danvi	lle
Occupation may incl or homemaker, if it a	applies.	Employer's address  How long employed th	Danville, V	<u>/A</u>		Suite 2 Works Roano	203 A at Go ke, VA	odyear, Danv 1 24018	lle
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	otor 2	Melinda C. Jumper	_		Case nu	mber (if known	15	-6205	54	
	Cor	by line 4 here			For De	ebtor 1	F	or Del	otor 2 c	)ř
	-	y 4 Hore	4		\$	2,287.32	\$		1,64	
	List	all payroll deductions:								<u> </u>
	5a.	Tax, Medicare, and Social Security deductions								
	5b.	Mandatory contributions for retirement plans	5	a.	\$	365.97	\$		206	5.18
	5c.	Voluntary contributions for retirement plans	51	b.	\$	0.00				).00
	5d.	Voluntary contributions for retirement plans	5	C.	\$	0.00		——	~	·
	5e.	Required repayments of retirement fund loans	50	d.	\$	0.00				0.00
	5f.	Domestic support obligations	56	∋.	\$	0.00				0.00
	5g.	Union dues	5f		\$	0.00	-			0.00
	5h.		50	<b>]</b> .	\$	0.00	- <b>\$</b>			0.00
		Other deductions. Specify: Pre-tax deductions-401K		1.+	\$	0.00	. ′ _			0.00
		WIEDINS			\$	252.85	· Ψ			.91
	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	-		·				0	.00
	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	6.		\$	618.82	\$_		329	.09
	l int	other in the first line pay. Subtract line 6 from line 4.	7.		\$	1,668.50	\$	_	1,316	34
	oa.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		¢	<u> </u>				<u> </u>
	8b.	Interest and dividends			\$	0.00	\$		0.	00
i	8c.	Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00	\$	<u> </u>	0.	00
8	3d.	Unemployment compensation	8c.		\$	0.00	\$		0	00
8	Зe.	Social Security	8d.		\$	0.00	\$			00
		Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			\$	0.00	\$ <u></u>			00
	g.	Pension or retirement income	8f.	3	<u> </u>	0.00	\$		0.0	00
8	h.	Other monthly income, Specify:	8g.		5	0.00	\$		0.0	00
_			8h.+	- 9	·	0.00_+	- \$		0.0	
		f other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$			00
C	alcul	ate monthly income. Add line 7 + line 9.	— م: ۱						7	
Αı	ad the	entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	1		1,668	3. <b>50</b> + \$ _	1,3	16.34	= \$	2,984
In ot Do Sp	tate a clude her fr o not pecify	Il other regular contributions to the expenses that you list in Schedule J contributions from an unmarried partner, members of your household, your d lends or relatives.  include any amounts already included in lines 2-10 or amounts that are not average.	epen ⁄ailab	le t	o pay ex	penses liste	d in S	chedu.	le J. +\$	
<b>\</b> O  V   X	id the rite th plies	e amount in the last column of line 10 to the amount in line 11. The resul at amount on the Summary of Schedules and Statistical Summary of Certain	t is tr Liabi	ne c	combined s and Re	d monthly inc elated <i>Data</i> ,	ome.	12.	+\$       \$	2,984.
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A CONTRACTOR OF THE CONTRACTOR	nation to identify	your case					
Debtor 1	Eugene H.	Jumper				heck if this is:	
,			———— <u>—</u> —		_	_	
Debtor 2	Melinda C.	Jumper				An amended filin	
(Spouse, if filing)	<del></del> -					13 expenses as	owing post-petition chapte of the following date:
	kruptcy Court for the	e: <u>WES</u> 7	TERN DISTRICT OF VIRG	INIA		MM / DD / YYYY	
	5-62054				_		
(If known)					E	A separate filing to 2 maintains a sep	for Debtor 2 because Debt parate household
Official Fo	orm B 6J		· · · · · · · · · · · · · · · · · · ·				
Schedule		Evno	200				
Be as complete	and accurate	rxhei	iises				12/1
mamber (ii kiiow	nore space is ne vn). Answer eve ribe Your House	ery questic	e. If two married people a ach another sheet to this on.	form. On the top of a	th are e any ado	equally responsible ditional pages, write	for supplying correct your name and case
l. Is this a join	nt case?	<u> </u>				·	
☐ No. Go to							
		in a sensi	rate household?				
		iii a sepai	ate nousehold?				
<u>■</u> N	-	st file a se <sub>l</sub>	parate Schedule J.				
. Do you have	e dependents?	■ No					
Do not list De and Debtor 2	ebtor 1	□ Yes.	Fill out this information for each dependent	Dependent's relations	ship to	Dependent's	Does dependent
Do not state			cuon dependent	Debtor 1 or Debtor 2		age	live with you?
dependents'	names.						□ No
							☐ Yes
							□ No
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							☐ Yes
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Do your eyr	enses include						□ Yes
	mises include	ian 🛅 j	No				L⊒ 16S
expenses of	people other the	its?	Yes				
expenses of yourself and art 2: Estima	your dependent	its? U'	. m				
expenses of yourself and art 2: Estimate your expenses	te Your Ongoin	g Monthly	/ Expenses	U are using this form			
expenses of yourself and art 2: Estimate your expenses	te Your Ongoin	g Monthly	/ Expenses	u are using this form emental Schedule J,	as a si	upplement in a Cha	pter 13 case to report
expenses of yourself and Estima estimate your expenses as of a oplicable date.	your dependen te Your Ongoin penses as of you date after the ba	g Monthly ur bankrup ankruptcy	r Expenses ptcy filing date unless yo is filed. If this is a suppl		as a si check t	upplement in a Cha he box at the top of	pter 13 case to report the form and fill in the
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## Case 15-62054 Doc 19 Filed 11/30/15 Entered 11/30/15 15:22:05 Desc Main Document Page 14 of 16

Eugene H. Jumper  Melinda C. Jumper	Case i	number (if known)	15-62054
ilities:		= =: (» (a)OH()	
Water, sewer, garbage collection	(	ба. \$	273.00
Telephone, cell phone, Internet, satellite, and cable	(	ôb. \$	0.00
Other, Specify: Cell phones Wife	(	3c. \$	88.00
Cell phone	6	Sd. \$	120.00
od and housekeening supplies		\$	48.00
ildcare and children's education costs		7. \$	419.00
othing, laundry, and dry cleaning		8. \$	0.00
rsonal care products and services		9. \$	0.00
edical and dental expenses	1	0. \$	61.00
ansportation, include gas, maintanance, hus-	1	1. \$	0.00
tertainment, clubs, recreation, newspapers, magazines, 11		Ŧ	350.00
aritable contributions and religious donations			0.00
urance,	1-	4. \$	0.00
not include insurance deducted from your pay or included in lines 4 or 20.			
	15	a. \$	0.00
Vehicle insurance	151	b. \$ ———	0.00
Other insurance Specific	150	c. \$	164.00
es. Do not include taxes deducted 6	150	d. \$	0.00
city: Personal Property		*	
allment or lease payments:	16	S. \$	100.00
Car payments for Vehicle 1			100.00
Car payments for Vehicle 2	17a	₹. \$	0.00
Other, Specify	17b	). \$	0.00
Other, Specify:	17c	: \$ <del></del>	0.00
r payments of alimony, maintenance	17d	\$	0.00
ucted from your pay on line 5. Schedule I. Your harms (Office of the port as	3		
The state of the s	18		0.00
νηγ,		7	0.00
er real property expenses not included in lines 4 or 5 of this form and 0.1			· · · · · · · · · · · · · · · · · · ·
Mortgages on other property	edule i: \	our Income.	
			0.00
Property, homeowner's, or renter's insurance			0.00
Maintenance, repair, and upkeen expenses			0.00
Homeowner's association or condominium dues			0.00
r: Specify: Em Fund			0.00
cuts & grooming	21.	+\$	100.00
- cigarettes		+\$	10.00
		+\$	71.00
monthly expenses. Add lines 4 through 21.			
esuit is your monthly expenses	22.	<b>b</b>	2,454.00
nate your monthly net income.			
Copy line 12 (your combined monthly income) from Schedule I.	232	¢	
Copy your monthly expenses from line 22 above.			2,984.84
	230.	- <del>3</del>	2,454.00
Subtract your monthly expenses from your monthly income.	İ	·	
The result is your monthly net income.	23c.	\$	530.84
ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you are the second of the year after you	ı	<u> </u>	
SIMPLE, GO YOU expect to finish paying for your parties of Williams He year after you	a me this	form?	
ation to the terms of which paying for your car loan within the year or do you expect your mo	odazan ne	umant to in	
ation to the terms of your mortgage?	ortgage pa	yment to increase or	decrease because of a
ation to the terms of your mortgage?	ortgage pa	yment to increase or	decrease because of a
The body of the season is the body of the season of the se	tillities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: Cell phones Wife Cell phone cod and housekeeping supplies bod and housekeeping supplies codiand housekeeping supplies codiand housekeeping supplies codiand dousekeeping supplies codiand housekeeping supplies coding, laundry, and dry cleaning cersonal care products and services celical and dental expenses ansportation. Include gas, maintenance, bus or train fare. In out include car payments. Intertainment, clubs, recreation, newspapers, magazines, and books caritable contributions and religious donations surance. In othinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance Vehicle insurance Vehicle insurance. Specify. Kes. Do not include taxes deducted from your pay or included in lines 4 or 20. Corpayments for Vehicle 1 Car payments for Vehicle 2 Cother. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: Personal Property expenses not included in lines 4 or 5 of this form on Sch Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Property. Em Fund Couts & grooming Cigarettes In monthly expenses. Add lines 4 through 21. Tesult is your monthly expenses. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above.  Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income.	tilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection cellephone, cell phone, Internet, satellite, and cable services cell phone odd and housekeeping supplies hildcare and children's education costs othing, laundry, and dry cleaning arsonal care products and services edical and dental expenses ansportation, include gas, maintenance, bus or train fare. not include car payments, tertainment, clubs, recreation, newspapers, magazines, and books tertainment, cl	tilities:  a. Electricity, heat, natural gas  b. Water, sewer, garbage collection  college of the property and the property  all ment or lease payments:  college of the property  all ment or lease payments for Vehicle 1  college of the property  college or property, homeowner's or renter's insurance  college or property. Property  college or property. Property  college or property expenses not included in lines 4 or 5 of this form or on Schedule I: Vour Income.  Case pour monthly expenses  college or property  college or propert

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Anderson Financial Services LLC Loan Max 3440 Preston Ridge Rd, Ste 500 Alpharetta, GA 30005-3823

Commonwealth of Virginia Department of Taxation P O Box 2156 Richmond, VA 23218-2156

Credit Control, LLC PO Box 488 Hazelwood, MO 63042-0488

Danville Reg Medical Center Business Office PO Box 13620 Richmond, VA 23225-8620

Danville Regional Medical Center 142 South Main Street Danville, VA 24541-2987

LCA Collections PO Box 2240 Burlington, NC 27216-2240

Nations Recovery Center, Inc PO Box 620130 Atlanta, GA 30362-2130

Piedmont Credit & Collec 204 Boatwright Ave Danville, VA 24541-1902

(p) SPRINGLEAF FINANCIAL SERVICES P O BOX 3251 EVANSVILLE IN 47731-3251

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Advance America, Cash Advance Ctrs of VA, Inc d/b/a 644B Piney Forest Road Danville, VA 24540-2800

Anderson Financial Services, LLC Loan Max 2626 Riverside Dr. Danville, VA 24540-4120

Credit Acceptance Company Services 2460 Paneo Ceree Parkway Henderson, NV 89074

Danville Diagnostic Imaging Center

C/O Piedmont Credit & Collection Srvs.

Danville, VA 24543-1596 Danville Regional Medica Resurgent Capital Services

PO Box 1596

PO Box 1927 Greenville, SC 29602-1927

Danville Regional Medical Center C/O Piedmont Credit & Collection Srvs. PO Box 1596 Danville, VA 24543-1596

Micheal Wayne Investment Co. PO Box 8730 Virginia Beach, VA 23450-8730

Palisades Collections, LLC VATIV RECOVERY SOLUTIONS LLC, dba SMC As agent for Palisades Collections, LLC P.O. Box 40728 Houston, TX 77240-0728

RC Group LLC 427 E. 17th St. 7-451 Costa Mesa, CA 92627-3201

Springleaf Financial Services of America, Inc., The Forum 625 Piney Forest Rd, Ste 201 Danville, VA 24540-2846

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American Medical Collection Agency 4 Westchester Plaza Bldg 4 Elmsford, NY 10523-1612

CREDIT ACCEPTANCE ATTN: BANKRUPTCY DEPT 25505 W. 12 MILE RD. SUITE # 3000 SOUTHFIELD, MI 48034-8331

Credit Acceptance Corp PO Box 551888 Detroit, MI 48255-1888

Danville Radiologist Inc. C/O Piedmont Credit & Collection Srvs. PO Box 1596 Danville, VA 24543-1596

Danville Regional Medical 05285 PO Box Cincinnati, OH 45263-0938

Internal Revenue Service CENTRALIZED INSOLVENCY OPERATIONS PO Box 7346 Philadelphia, PA 19101-7346

Morehead Memorial Hospital PO Box 151 Eden, NC 27289-0151

Payday Advance, LLC Suite 204 625 Piney Forest Rd. Danville, VA 24540-2846

Seterus PO Box 2008 Grand Rapids, MI 49501-2008

Treasurer of City of Danville, VA PO Box 1565 Danville, VA 24543-1565

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USTrustee

Office of the United States Trustee 210 First Street, Suite 505 Roanoke, VA 24011-1620

William J. Ciszczon, Corp. Attorney United Consumer Financial Services 865 Bassett Road Westlake, OH 44145-1194

Melinda C. Jumper 572 Arlington Road Danville, VA 24541-4902

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Christopher T. Micale (393585) P. O. Box 1001 Roanoke, VA 24005-1001

Reginald R Yancey P 0 Box 11908 Lynchburg, VA 24506-1908 United Consumer Financial Services Bass & Associates, P.C. 3936 E. Ft. Lowell Rd, Suite # Tucson, AZ 85712-1097

Eugene H. Jumper 572 Arlington Road Danville, VA 24541-4902

The preferred mailing address (p) above has been substituted for the following enacty/entities as so specified by said entity/entities in a Sotice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g)(4).

Springleaf Financial Services PO Box 3251 Evansville, IN. 47731-3251

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